

STATE OF NEW HAMPSHIRE

2019 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

NEW HAMPSHIRE DEPARTMENT OF STATE

PLEASE PRINT I. Name of Lobbyist(s) Lyn M. Schollett II. Name of lobbyist's partnership, firm or corporation, if any: New Hampshire Coalition Against Domestic & Sexual Violence (Name of partnership, firm or corporation) 03302 PO Box 353 Concord (Town/City) Business Address: (Street) e-mail lyn@nhcadsv.org (603) 224-8893 (Telephone) III. This statement covers: (Choose one - file separate reports for each client, OR you may file a separate report for reportable expense transactions which are not attributable to any one client). ☐ All reportable transactions occurring in the months prior to the reporting date relative to the following client: New Hampshire Coalition Against Domestic & Sexual Violence (Full Name of Client as it appears on the Lobbyist Registration Form) OR [] All reportable transactions by the lobbyist (including the lobbyist's family), or the lobbying firm listed below which are unrelated to any particular client. IV. Date of Report April 24, 2019 🔀 July 31, 2019 \Box activity from date of registration to 3/31/19 activity from 4/1/19 to 6/30/19 Reports cover: January 29, 2020 🗆 October 30, 2019 🔲 activity from 7/1/19 to 9/30/19 activity from 10/1/19 to 12/31/19 V. There have been no fees received and no reportable transactions made since the last report. If this box is checked, complete just this form and submit it to the Secretary of State 's Office, State House, Room 204, Concord, NH 03301. VI. Check if additional reports are attached: If you have received fees or made expenditures, you must file Addendum A- Fees and Expenses ☐ If you have paid an honorarium or reimbursed expenses, you must file Addendum B- Report of Honorariums or Expense Reimbursement If you, your firm, or your family has made political contributions, you must file Addendum C- Political Contributions Sworn Statement/Affirmation by Lobbyist

I have read RSA 15, RSA 15-B, RSA 14-C and RSA 664 and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief.

(Signature of lobbyist)

Lyn M. Schollett (Print Name of lobbyist)

LEASE PRINT

STATE OF NEW HAMPSHIRE



Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s) Lyn M. Schollett		
II. Name of lobbyist's partnership, firm or corporation, if any:		
New Hampshire Coalition Against Domestic and Sex (Name of partnership, firm or corporation)	kual Viole	nce
III. Name of Client New Hampshire Coalition Against Domestic an Sexual Violence	d_Date_	
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The groreduced by any expenses:	relations, o	r public relations service
a) Total of all fees received in this reporting period	a) \$	
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year).	b) \$ ear)	
c) Total of all fees received to date (Add lines a and b)	c) \$	
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$	
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to repfees. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report of expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office exindividual expenses where the expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of less being lobbied, purchase of a ceremonial object given to a person being lobbie (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greate restaurant expenses for a legislative reception). Expenses for honorariums, contributions will be reported on separate addendums and should not be reported.	client and if may be filed aggregate expenses; (b) e: meals pu ss than \$10 to d with a val arting period the of greater or than \$25, expense re	expenditures are made by for the lobbyist(s)/firm total of all expenses paid the aggregate total of all rchased during a busines that is given to the person ue of \$25.00 or less); and of greater than \$25.00 for than \$25, purchase of a but not greater than \$50 imbursement, or political
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$	83.20
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$	0.00
c) Total of all itemized expenditures reported in detail in section VI.	c) \$	0.00

d) Total expenses for this reporting period	d) \$ 83.20
(Add lines a, b and c)	
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$
f) Total of all expenses year to date	f) \$83.20
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leading period, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
	\$
	\$
	\$
	\$
· · · · · · · · · · · · · · · · · · ·	\$
	\$
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief.	n that the foregoing information
(Signature of Johnvist)	4.5.19
(Signature of lobbyist)	(Date)
Lyn M. Schollett	
(Print Name of lobbyist)	